-	PATI	ENT APPLIC	NULLA	FEE DETEI le for Form PT(N RECORD		ice; U.S. DEPARTMENT OF COMMERCOSS it displays a valid OMB control number Application or Docket Number			
		CLAIMS AS	FILED -	PARTI					OTHE	TUAN
(Column 1) (Column 2)						SMALI	SMALL ENTITY		OTHER THAN SMALL ENTITY	
FOR ASIC FEE		NUMBE	NUMBERFILED		REXTRA	RATE	FEE		RATE	FEE
7 C	CFR 1.16(a))						s	OR		s
OTAL CLAIMS 17 CFR 1.16(c))			minus 20 = '			X \$ =		1	V	 -
DEPENDENT CLAIMS 17 CFR 1.16(b))		is	minus 3 = ·					OR	× \$=	
HILVER CORPORATE AND ADDRESS OF THE PROPERTY O						X \$=		OR	× \$=	·····
_	(2.00.1.100)					+ \$=		OR	+ \$=	
If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL	<u></u>	OR	TOTAL	
	CL	AIMS AS AMI	ENDED -	- PART II						
		(Column 1)		(Column 2)	(Column 3)			OR	OTHER	R THAN
7	5/01	CLAIMS		HIGHEST	<u> </u>	SMALL	ENTITY	7	SMALL	ENTITY
	19/06	REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI-
	Total	AMENDMENT	Minus	PAID FOR	-	<u> </u>	FEE			TIONAL FEE
AIVICIADIVICIA	(37 CFR 1.16(c)) Independent		Minus	2 /		X 5	1	OR	x s=	
	(37 CFR 1:16(b))	_5		_5_		×::		OR	x s=	
\Box	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$=		OR	+ \$ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			J	ADDEFEE	
۵		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT			1		
		AFTER AMENDMENT		PREVIOUSLY	EXTRA	RATE	ADDI- TIONAL	ł	RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))	·	Minus	PAID FOR	=		FEE	1		FEE
			Minus		-	X \$=		OR	X \$=	
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	Independent (37 CFR 1.16(b))							OR	1.	
	Independent (37 CFR 1.16(b))	ATION OF MULTIPL	E DEPENDE	NT CLAIM (37 CF	R 1.16(d))	+ \$ =		1 0"	+ 5=	
	Independent (37 CFR 1.16(b))		E DEPENDE	NT CLAIM (37 CF	R 1.16(d))			OR	TOTAL ADD'L FEE	
AMENOMEN	Independent (37 CFR 1.16(b))		E DEPENDE	NT CLAIM (37 CF	R 1.16(d)) (Column 3)	+s_ =		1	TOTAL	
AMENDINGINE	Independent (37 CFR 1.16(b))	ATION OF MULTIPL	E DEPENDE	(Column 2) HIGHEST	(Column 3)	+ \$= TOTAL ADD'L FEE	4001	1	TOTAL ADD'L FEE	
CHICKLING	Independent (37 CFR 1.16(b))	ATION OF MULTIPL (Column 1) CLAIMS	E DEPENDE	(Column 2) HIGHEST NUMBER PREVIOUSLY	·	+s_ =	ADDI- TIONAL	1	TOTAL	
באורוארואריאיני	Independent (37 CFR 1.16(b))	(Column 1) CLAIMS REMAINING AFTER	E DEPENDE	(Column 2) HIGHEST NUMBER	(Column 3) PRESENT	+\$ = TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE RATE	
AMENDINEN	Independent (37 CFR 1.16(b)) FIRST PRESENT Total (37 CFR 1.16(c)) Independent	(Column 1) CLAIMS REMAINING AFTER		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	+ \$= TOTAL ADD'L FEE	TIONAL	1	TOTAL ADD'L FEE	TIONAL
באורוארואריאיני	FIRST PRESENT. Total (37 CFR 1.16(b)) Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	Minus Minus	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	+\$ = TOTAL ADD'L FEE	TIONAL	OR	TOTAL ADD'L FEE RATE	TIONAL
AMENDING	FIRST PRESENT. Total (37 CFR 1.16(b)) Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	Minus Minus	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	+\$ = TOTAL ADD'L FEE RATE X \$ _ =	TIONAL	OR	TOTAL ADD'L FEE RATE X \$ =	TIONAL

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.